PART B - FEE(S) TRANSMITTAL							$\mathcal{A}_{\mathcal{A}}$	
N37 0 1 2004 1	or <u>Fax</u>				Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (703) 746-4000			
INSPAUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate All function of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.								
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 26574 7590 08/26/2004 SCHIFF HARDIN, LLP PATENT DEPARTMENT 6600 SEARS TOWER CHICAGO, IL 60606-6473					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission			
					I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below. Steven H. Noll (Depositor's name)			
					Stad Alloll (Signature)			
					October	28, 2004	(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED INVEN			OR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/787,735	10/15/2001	Johan Lidman			<u> </u>	P01,0065	6548	
TITLE OF INVENTION: APPARATUS FOR DETERMINING THE ACTUAL STATUS OF A PIEZOELECTRIC SENSOR IN A MEDICAL IMPLANT								
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUI	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1370			\$0	\$1370	11/26/2004	
EXAMINER		ART UNIT		CLA	ASS-SUBCLASS			
OROPEZA, FRANCES P		3762			607-019000			
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>			<ul> <li>2. For printing on the patent front page, list         <ol> <li>(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,</li> <li>(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.</li> </ol> </li> </ul>					
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)         PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.         (A) NAME OF ASSIGNEE       (B) RESIDENCE: (CITY and STATE OR COUNTRY)         St. Jude Medical AB       Jarfalla, Sweden         11/02/2004 MBEYENE2 00000004 09787735         01 FC:1501       1370.00 OP								
Please check the appropriate	assignce category or catego	ries (will not be prim	ted on the p	atent) :	Individual 🖾 Co	orporation or other private gr	oup entity 🗖 Government	
4a. The ipllowing fee(s) are enclosed:       4b. Payment of Fee(s):         Issue Fee       Image: A check in the amount of the fee(s) is enclosed.         Image: Publication Fee (No small entity discount permitted)       Image: Payment by credit card. Form PTO-2038 is attached.         Image: Payment of Copies						is attached.	credit any overpayment, to	
5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.								
The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.								
Authorized Signature	Stat.	Nol	P		Date Oc	ctober 28, 20	04	
Typed or printed name Steven H. Noll			C Registration No 28,982					
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 14:0, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.								

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